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|---|--|-------------------|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> | Attorney Docket No. 244826US0CONT        |                   |
|   | First Inventor or Application Identifier | Motoyuki NAKAMURA |
|   | Title                                    | ANALGESIC AGENT   |

|  |   |
|--|---|
| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents   | <b>ADDRESS TO:</b> Commissioner for Patents<br>Mail Stop Patent Application<br>Alexandria, Virginia 22313   |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17)<br>(Submit an original and a duplicate for fee processing)<br><br>2. <input checked="" type="checkbox"/> Specification Total Sheets <input type="text" value="21"/><br><br>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets <input type="text" value="2"/><br><br>4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages <input type="text" value="4"/><br>a. <input type="checkbox"/> Newly executed (original or copy)<br>b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d))<br>(for continuation/divisional with box 17 completed)<br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) named in<br>the prior application, see 37 C.F.R. §1.63(d)(2) and<br>1.33(b).<br>5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer<br>Program (Appendix)<br>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission<br>(if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CRF)<br>b. Specification or Sequence Listing on :<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or<br>ii. <input type="checkbox"/> Paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies | <b>ACCOMPANYING APPLICATION PARTS</b><br><br>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76<br>9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of<br>(when there is an assignee) Attorney<br>10. <input type="checkbox"/> English Translation Document (if applicable)<br>11. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS<br>Statement (IDS)/PTO-1449 Citations<br>12. <input checked="" type="checkbox"/> Preliminary Amendment<br>13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard<br>14. <input type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)<br>15. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27<br>16. <input checked="" type="checkbox"/> Other: Request for Priority |

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

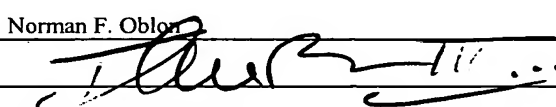
☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.: 09/765,425

Prior application information: Examiner: Paul J. Killos Group Art Unit: 1625

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

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| Name:      | Norman F. Oblon   | Registration No.: | 24,618  |
| Signature: |  | Date:             | 11-3-03 |
| Name:      | Thomas W. Barnes, III   | Registration No.: | 52,595  |

17510 US PTO  
10/698522  
11/03/03

Docket No. 244826US0CONT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

INVENTOR(S) Motoyuki NAKAMURA, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: ANALGESIC AGENT

**FEE TRANSMITTAL**

COMMISSIONER FOR PATENTS  
ALEXANDRIA, VIRGINIA 22313

| FOR  | NUMBER<br>FILED | NUMBER<br>EXTRA | RATE      | CALCULATIONS |
|--|-----------------|-----------------|-----------|--------------|
| TOTAL CLAIMS   | 14 - 20 =       | 0               | x \$18 =  | \$0.00       |
| INDEPENDENT CLAIMS   | 2 - 3 =         | 0               | x \$86 =  | \$0.00       |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)   |                 |                 | + \$290 = | \$0.00       |
| <input type="checkbox"/> LATE FILING OF DECLARATION                  |                 |                 | + \$130 = | \$0.00       |
| BASIC FEE  |                 |                 |           | \$770.00     |
| TOTAL OF ABOVE CALCULATIONS  |                 |                 |           | \$770.00     |
| <input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY |                 |                 |           | \$0.00       |
| <input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE              |                 |                 | + \$130 = | \$0.00       |
| <input type="checkbox"/> RECORDATION OF ASSIGNMENT                   |                 |                 | + \$40 =  | \$0.00       |
| TOTAL  |                 |                 |           | \$770.00     |

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- ☒ A check in the amount of \$770.00 to cover the filing fee is enclosed.
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Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,  
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Date: 11-3-03

  
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